9/803802

| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Nu 821217/WW | | | | | | | | | | | | nber | |
|---|----------------|---|-------------|-----------------------------------|----------------------|------------------|------------|--------------------|------------------------|----------|---------------------|------------------------|----|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL E | NTITY | OR | | R THAN ENTITY | 1 |
| TOTAL CLAIMS | | | | | | | RATE FEE | | | 7 | RATE FEE | | |
| FOR | | | NUMBER | NUMBER FILED | | NUMBER EXTRA | | BASIC FE | | ٦,, | BASIC FEE | | 1 |
| TOTAL CHARGEABLE CLAIMS | | | 19 m | 19 minus 20= | | · Ø | | X\$ 9= | - | 1 | 70.40 | | 1 |
| INDEPENDENT CLAIMS | | | 6 1 | 6 minus 3 = | | . 3 | | | <u> </u> | OR | | -110 | 1 |
| MULTIPLE | DEPEN | IDENT CLAIM | PRESENT | | <u> </u> | | | X40= | | OR | X80= | 240 | 1 |
| • If the difference in only ment in less than your entertool in | | | | | | | | +135= | | OR | +270= | | |
| • If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 950 |] |
| Spor CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL | ENTITY | OR | OTHER | THAN ENTITY | |
| ENT.A | | CLAIMS REMAINING AFTER AMENOMENT | | HIGH NUM PREVIO PAID | IEST BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | 1 |
| Total | | - 10 | Minus | / | 20 | . — | | X\$ 9= | | OR | X\$18= | | 1 |
| Indepe | | · T | Minus | | 6 | - | | X40= | | OR | X8 6 = | 8/0.00 | 1. |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CEAIM | | | | | | | | +135= | | OR | +270= | July- | ļ |
| | الساء والمجادر | | | , | : | | | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | Ho. | |
| | | (Column 1) | | (Cotur | | (Column 3) | | | | | | PAW | |
| Total Independent | | REMAINING AFTER AMENDMENT | : | PREVIO PAID | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total | | 200 | Minus | 6 | 0 | = / | | X\$ 9= | | OR | X\$18= | 50 | |
| | | · B 8 | Minus | 7 | 7 | - / | | X40= | | OR | ×80= | 200 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | | +270= | | |
| | | | | | | . : | L | TOTAL | | OR OR | | 500 | (|
| | | (Column 1) | | (Colun | nn 21 | (Column 3) | A | DDIT. FEE | | JUN . | ADDIT. FEE | . ماند | ۲۰ |
| Total Indeper | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID F | EST BER JUSLY | PRESENT EXTRA | Γ | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | · |
| Total | | • | Minus | •• | | = | I | X\$ 9= | | OR | X\$18= | rss | |
| Indeper | | • | Minus | ••• | | = | F | X40= | | | X80= | | |
| FIRST | PRESE | NTATION OF M | ULTIPLE DEI | PENDENT | CLAIM | | ╟ | .,,,,, | | OR | VOUS | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate box in column 1.

FORM PTO-175 (Rev. 6/00)

+135=

OR

+270=

TOTAL